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**DATE: May 7, 2006**

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**FAX NO: 571-273-8300****Document(s) Attached:**

**Power of Attorney and Correspondence Address  
Indication Form  
Revocation of Power of Attorney with New Power of  
Attorney  
Statement Under 37 CFR 3.73(b)**

**Total Pages: 4 (including this page)**

|                       |                                |
|-----------------------|--------------------------------|
| In re application of: | <b>Richard C. Ferri et al.</b> |
| Serial Number:        | <b>10/716,718</b>              |
| Conf. #               | <b>6317</b>                    |
| Filing Date:          | <b>November 19, 2003</b>       |
| Examiner:             | <b>Steven M. Marsh</b>         |
| Art Unit:             | <b>3632</b>                    |

**FROM:** Daryl K. Neff  
4 Eugene Circle  
Lincoln Park, NJ 07035  
Phone 973-316-2612

**POU920030185US1**

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PTO/SB/82 (04-05)

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|  |                        |                        |
|--|------------------------|------------------------|
| <b>REVOCATION OF POWER OF<br/>ATTORNEY WITH<br/>NEW POWER OF ATTORNEY<br/>AND<br/>CHANGE OF CORRESPONDENCE ADDRESS</b> | Application Number     | 10/716,718-Conf. #6317 |
|  | Filing Date            | November 19, 2003      |
|  | First Named Inventor   | Richard C. Ferri       |
|  | Art Unit               | 3632                   |
|  | Examiner Name          | Steven M. Marsh        |
|  | Attorney Docket Number | POU920030185US1        |

I hereby revoke all previous powers of attorney given in the above-identified application.

 A Power of Attorney is submitted herewith.

OR

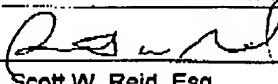
 I hereby appoint the practitioners associated with the Customer Number: \_\_\_\_\_ Please change the correspondence address for the above-identified application to: The address associated with  
Customer Number: \_\_\_\_\_

OR

|  |                     |       |    |
|--|---------------------|-------|----|
| <input checked="" type="checkbox"/> Firm or<br>Individual Name | Daryl K. Neff, Esq. |       |    |
| Address  | 4 Eugene Circle     |       |    |
| City   | Lincoln Park        |       |    |
| Country  | USA                 | State | NJ |
| Telephone  | (973) 316-2612      | Email |    |

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

|   |   |           |              |
|---|---|-----------|--------------|
| Signature   |  |           |              |
| Name  | Scott W. Reid, Esq.   |           |              |
| Date  | 05/01/06  | Telephone | 919-991-3502 |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |   |           |              |
| <input checked="" type="checkbox"/>   | *Total of 1 forms are submitted.  |           |              |

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POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM

|                        |                                 |
|------------------------|---------------------------------|
| Application Number     | 10/718,718                      |
| Filing Date            | November 19, 2003               |
| First Named Inventor   | Richard C. Ferri                |
| Title                  | Supporting Adapter for Portable |
| Art Unit               | 3632                            |
| Examiner Name          | Steven M. Marsh                 |
| Attorney Docket Number | POU920030185US1                 |

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

 Practitioners associated with the Customer Number: 

OR

 Practitioner(s) named below:

| Name          | Registration Number |
|---------------|---------------------|
| Daryl K. Neff | 38,253              |
|               |                     |
|               |                     |
|               |                     |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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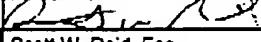
OR

|   |                     |       |    |           |
|---|---------------------|-------|----|-----------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Daryl K. Neff, Esq. |       |    |           |
| Address   | 4 Eugene Circle     |       |    |           |
| City  | Lincoln Park        | State | NJ | Zip 07035 |
| Country   | USA                 |       |    |           |
| Telephone   | (973) 316-2612      | Email |    |           |

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)

## SIGNATURE of Applicant or Assignee of Record

|                  |   |           |                |
|------------------|---|-----------|----------------|
| Signature        |  | Date      | 05/01/06       |
| Name             | Scott W. Reid, Esq.   | Telephone | (919) 981-3502 |
| Tell and Company |   |           |                |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/98 (09-04)

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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Richard C. Ferri, Moon J. Kim, Dikran S. MaliksetianApplication No./Patent No.: 10/716,718 Filed/Issue Date: November 19, 2003Entitled. SUPPORTING ADAPTER FOR PORTABLE COMPUTER SYSTEM\_\_\_\_\_  
\_\_\_\_\_  
(Name of Assignee) Lenovo (Singapore) PTE Ltd. , a Corporation  
(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1.  the assignee of the entire right, title, and interest; or
2.  an assignee of less than the entire right, title and interest.

The extent (by percentage) of its ownership interest is \_\_\_\_\_ %  
in the patent application/patent identified above by virtue of either:

A.  An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_  
Frame \_\_\_\_\_, or for which a copy thereof is attached.

OR

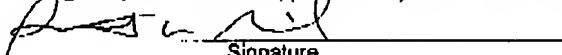
B  A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: Inventor To: International Business Machines Corp  
The document was recorded in the United States Patent and Trademark Office at  
Reel 014727, Frame 0083, or for which a copy thereof is attached.
2. From: International Business Machines Corp. To: Lenovo (Singapore) PTE Ltd.  
The document was recorded in the United States Patent and Trademark Office at  
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Additional documents in the chain of title are listed on a supplemental sheet.

Copies of assignments or other documents in the chain of title are attached.  
[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.



Signature

05/01/106

Date

Scott W. Reid, Esq.

919-991-3502

Telephone Number

Printed or Typed Name

Co-counsel

Title